

Reimbursable Agreement Cover Sheet

Agreement Information

Bureau: _____ Fund: 08 New Agreement ☐ Existing ☐

Agreement Number _____

Modification Number _____

Division Responsible for Agreement

Organization: _____
(XX-XX-XXXX-XX-XX-XX-XX)

Division Contact: _____

Extension: _____

AO Review: _____ Division: _____
(Initials) (Initials)

SMA Review: _____ OU: _____
(Initials) (Initials)

Customer Information

CAMS Customer Name _____

CAMS Customer Number _____
(From CAMS Customer Web Lookup)

Invoice Contact Number _____

Acceptance Contact Number _____

Financial Reporting Contact Number _____

Billing Basis

(Check One)

Advance ☐ Work-in-Process (WIP) ☐

Project Information *List all Charging Organizations to be included on Unfilled Customer Order**

FCFY (xxxx)	PROJECT-TASK (xxxxxxx-xxx)	CHARGING ORGANIZATION (xx-xx-xxxx-xx-xx-xx-xx)	AMOUNT
FCFY (xxxx)	PROJECT-TASK (xxxxxxx-xxx)	CHARGING ORGANIZATION (xx-xx-xxxx-xx-xx-xx-xx)	AMOUNT
FCFY (xxxx)	PROJECT-TASK (xxxxxxx-xxx)	CHARGING ORGANIZATION (xx-xx-xxxx-xx-xx-xx-xx)	AMOUNT
FCFY (xxxx)	PROJECT-TASK (xxxxxxx-xxx)	CHARGING ORGANIZATION (xx-xx-xxxx-xx-xx-xx-xx)	AMOUNT
FCFY (xxxx)	PROJECT-TASK (xxxxxxx-xxx)	CHARGING ORGANIZATION (xx-xx-xxxx-xx-xx-xx-xx)	AMOUNT

*Please attach continuation sheet(s) as needed for additional project-tasks/organizations and amounts

TOTAL AMOUNT for this Agreement/Modification \$ _____

Justification to Support Reimbursable Work

STRS Relation: _____

Other Agency Criteria: _____

Customer Accounting/Billing Information

Check "Yes" if information already exists in agreement

ALC Yes ☐ No ☐ _____

Appropriation Yes ☐ No ☐ _____

DUNS Yes ☐ No ☐ _____

Acceptance ATTN: _____

Other Billing Information: _____

Finance Division Use Only

Completed by: _____ Date: _____ RA Control Number: _____ Order Control Number: _____

Reimbursable Agreement Cover Sheet (continued)

Agreement Number _____

Modification Number _____

Additional Project Information

FCFY (xxxx)	PROJECT-TASK (xxxxxxxx-xxx)	CHARGING ORGANIZATION (xx-xx-xxxx-xx-xx-xx-xx)	AMOUNT
FCFY (xxxx)	PROJECT-TASK (xxxxxxxx-xxx)	CHARGING ORGANIZATION (xx-xx-xxxx-xx-xx-xx-xx)	AMOUNT
FCFY (xxxx)	PROJECT-TASK (xxxxxxxx-xxx)	CHARGING ORGANIZATION (xx-xx-xxxx-xx-xx-xx-xx)	AMOUNT
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FCFY (xxxx)	PROJECT-TASK (xxxxxxxx-xxx)	CHARGING ORGANIZATION (xx-xx-xxxx-xx-xx-xx-xx)	AMOUNT
FCFY (xxxx)	PROJECT-TASK (xxxxxxxx-xxx)	CHARGING ORGANIZATION (xx-xx-xxxx-xx-xx-xx-xx)	AMOUNT
FCFY (xxxx)	PROJECT-TASK (xxxxxxxx-xxx)	CHARGING ORGANIZATION (xx-xx-xxxx-xx-xx-xx-xx)	AMOUNT
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